## **APPLICATION FOR LEAVE OF ABSENCE (STUDENT)**

## **IMPORTANT INFORMATION FOR PARENTS**

- A maximum of 10 days will be approved for holidays, however it is <u>not</u> automatic that the school will authorise leave
- Leave requests should be submitted to the school, via this form, in advance of the period of leave
- Leave during exam periods and other important school events should be avoided
- Any PC tests or other COVID-19 precautionary procedures as detailed by the KHDA or DHA must be completed prior to the student returning to school

Student Name										
Year			Class/Form							
Details of the Proposed Absence										
From			То							
Reason for Absence										
Total Number of Days Proposed		Total Days Taken this Academic Year								
PARENTAL AGREEMENT										
Missed Learning										

I understand that the school will not supply work for my child for the duration of the absence, unless otherwise agreed by the Head of School.

During the absence, I will support my child by:

## **PRIMARY**

- ✓ Reading daily
- ✓ Practicing maths skills (e.g. number bonds, times tables)
- ✓ Providing opportunities for writing (e.g. keeping a journal)
- $\checkmark$  Any other activities as advised by the class teacher

## **SECONDARY**

- ✓ Ensuring they liaise with their teachers to complete any work missed
- ✓ Submit schoolwork and homework as required on the designated platforms, ensuring deadlines are met

agreement_						
$\square$ I confirm that the information on this form is true						
$\square$ I understand that this leave may have a negative impact on my child's academic achievement and that it						
is my child's responsibility to work with the teacher to complete necessary classwork and assessments						
$\Box$ I agree to keep the school informed of any changes to my travel arrangements or if my child is unable to						
return to school on the due date						
$\Box$ I am aware that if my child does not return to school by the date provided, he/she may lose their place a						
his school						
$\Box$ I am aware of my role as a parent in supporting the continuation of my child's learning						
ignature of Parent Date						

FOR SCHOOL USE ONLY										
Attendance Record	Р		Н		I		Т			
Authorise?	Yes		No		Partial					
Signed					Date					